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Atty Docket No. 020375-003500US

PTO FAX NO.: 1-571-273-8300

MAIL STOP: Amendment

ATTENTION: Examiner Patel, Jagdish

Group Art Unit 3624

OFFICIAL COMMUNICATION
FOR THE PERSONAL ATTENTION OF
EXAMINER JAGDISH PATEL

CERTIFICATION OF FACSIMILE TRANSMISSION

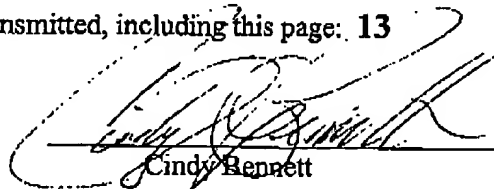
I hereby certify that the following documents in re Application of Mark Thompson, Application No. 09/965,667, filed September 26, 2001 for SYSTEMS AND METHODS TO FACILITATE PAYMENT FOR SHIPPED GOODS are being facsimile transmitted to the Patent and Trademark Office on the date shown below.

Documents Attached

1. Transmittal Form (1 page);
2. Petition for Extension of Time - 1 month (1 page); and
3. Amendment (10 pages).

Number of pages being transmitted, including this page: 13

Dated: February 6, 2006


Cindy Bennett

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0388


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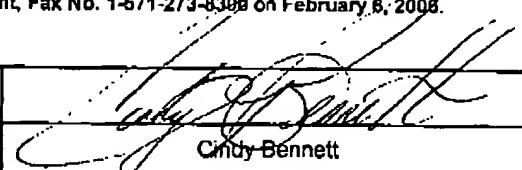
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PTO/SB/21 (08-04)

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/985,667	
	Filing Date	September 26, 2001	
	First Named Inventor	Thompson, Mark	
	Art Unit	3624	
	Examiner Name	Patel, Jagdish	
Total Number of Pages in This Submission	12	Attorney Docket Number	020375-003500US

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input checked="" type="checkbox"/> Petition for Extension of Time (1 month) <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD. Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks: The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Townsend and Townsend and Crew LLP		
Signature			
Printed name	Patrick M. Boucher		
Date	February 6, 2006	Reg. No.	44,037

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the Patent and Trademark Office, MAIL STOP: Amendment, Fax No. 1-671-273-8300 on February 6, 2006.			
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